Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	C C00027466
	G 00027400
Check if 24-hour report	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
ACQUIRE DIGITAL	08 08 2016
Mailing Address 512A EAST IRIS DR	Amount
City State Zip Code	8137.11
NASHVILLE TN 37204	Transaction ID : WFT201671093-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	08 05 7 2016
Name of Federal Candidate Support Office	Sought: House District:
BAYH EVANS BIRCH III Oppose	President State: IN
Calendar Year-To-Date Per Election for Office Sought Disbut 230762.94 Disbut 2016	orsement For: Primary ⊠ General Other (specify) ▶
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
Mailing Address 512A EAST IRIS DR	08 09 2016
SIZILE/IET INTE SIX	Amount
City State Zip Code	8000.00
NASHVILLE TN 37204	Transaction ID: WFT201671095-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
BAYH EVANS BIRCH III Oppose	President State: IN
Calendar Year-To-Date Per Election for Office Sought Disbut 230762.94	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	16137.11
(L) COLOR DE	10137.11
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Banning Jay [Electronically Filed] Date 0	8 10 2016
Signature	

Schedule E)	PAGE 2 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	C C00027466
	O THE STATE OF THE
Check if 24-hour report X 48-hour report New report Amends report	t filed on M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
DEL RAY MEDIA	08 09 7 2016
Mailing Address 1427 LESLIE AVE.	Amount
City State Zip Code	10000.00
ALEXANDRIA VA 22301	Transaction ID : WFT201671096-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION Category/ Type	Date of Disbursement of Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Office Country House Districts
BAYH EVANS BIRCH III Support Oppose	Office Sought: House District: President Senate State: IN
	Disbursement For: Primary General
Calcillati Total To Bato	2016 Other (specify) ▶
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
ACQUIRE DIGITAL	08
Mailing Address 512A EAST IRIS DR	Amount
0.1.	1005.00
City State Zip Code NASHVILLE TN 37204	1865.22 Transaction ID : WFT201671097-1
Purpose of Evpanditure	Date of Disbursement or Obligation
DIGITAL MEDIA PLACEMENT Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
BAYH EVANS BIRCH III Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 230762.94	Disbursement For: Primary ☐ General 2016 ☐ Other (specify) ▶
	Charles M
(a) SUBTOTAL of Itemized Independent Expenditures	11865.22
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Banning Jay [Electronically Filed] Date	08 10 2016
Signature	

Schedule E)	L /(L (2)			PAGE 3 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
NRSC				C C00027466
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M / D D / Y H Y H Y H Y
Full Name of Payee ACQUIRE DIGITAL				of Public Distribution/Dissemination
Mailing Address - 121 - 107 IDIO DD			L	08 09 2016
Mailing Address 512A EAST IRIS DR			Amou	nt
City	State	Zip Code		86505.00
NASHVILLE	TN	37204		action ID: WFT201671098-1 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT		Category/ Type		08
Name of Federal Candidate		Support	Office Sough	t: House District:
HASSAN MARGARET		Oppose	Preside	ent Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		1149798.52	Disbursemen 2016 O	t For: Primary X General ther (specify) ▶
Full Name of Payee STRATEGIC MEDIA PLACEMENT			Date	of Public Distribution/Dissemination
STRATEGIC WEDIA PLACEWENT				08
Mailing Address 7669 STAGERS LOOP			Amou	int
	01-1-	7'- 0-4-		424200 62
City S DELAWARE	State OH	Zip Code 43015	Transa	421390.62 action ID : WFT2016710910-1
Purpose of Expenditure		Octobrani/	Date	of Disbursement or Obligation
MEDIA PLACEMENT		Category/ Type	⅃ Ľ	08 04 2016
Name of Federal Candidate		Support	Office Sough	nt: House District:
HASSAN MARGARET		Oppose	Presid	ent Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		1149798.52	Disbursemer 2016	nt For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures.			•	507895.62
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· -	7 7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Banning Jay	[Electron	ically Filed] Date	M = M /	10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ i i buto		

Schedule E)	PAGE 4 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	C C00027466
Check if 24-hour report X 48-hour report New report Amends re	eport filed on/
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
Mailing Address 512A EAST IRIS DR	08 09 2016
	Amount
City State Zip Code NASHVILLE TN 37204	37501.33
	Transaction ID: WFT2016710911-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	08 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
HASSAN MARGARET Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought , 1149798.52	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
DEL RAY MEDIA	08 / 09 / 2016
Mailing Address 1427 LESLIE AVE.	Amount
City State Zip Code	370491.50
ALEXANDRIA VA 22301	Transaction ID : WFT2016710912-1 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type	08 / 04 / 2016
Name of Federal Candidate Support	Office Sought: House District:
MASTO CORTEZ CATHERINE Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 1048048.62	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	407992.83
(-)	407992.03
(b) SUBTOTAL of Unitemized Independent Expenditures	····· >
(c) TOTAL Independent Expenditures	····· >
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agen party committee) any political party committee or its agent.	
	ate 08 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	C C00027466
	G 500027400
Check if 24-hour report X 48-hour report New report Amends report filed	on
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
ACQUIRE DIGITAL	08 09 2016
Mailing Address 512A EAST IRIS DR	Amount
City State Zip Code	80391.06
NASHVILLE TN 37204	Transaction ID: WFT2016710914-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	08 / 04 / 2016
Name of Federal Candidate Support Office	e Sought: House District:
MASTO CORTEZ CATHERINE Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
Mailing Address 512A EAST IRIS DR	08 09 2016
5 SIZA LAGI ING DIN	Amount
City State Zip Code	18375.00
NASHVILLE TN 37204	Transaction ID : WFT2016710915-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	08 / 05 / 2016
Name of Federal Candidate Support Office	e Sought: House District:
MASTO CORTEZ CATHERINE Oppose	President State: NV Senate
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	00700.00
(a) SOBTOTAL OF HOMESCA INDEPENDENT EXPONDITURES	98766.06
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Banning Jay [Electronically Filed] Date	08 10 2016
Signature	

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
NRSC		C C00027466
Check if 24-hour report X 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee ACQUIRE DIGITAL	Date	of Public Distribution/Dissemination
		08 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 512A EAST IRIS DR	Amou	unt
City State Zip Co	ode	8000.00
NASHVILLE TN 37204		saction ID : WFT2016710917-1 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION Category		08 / 04 / 2016
Name of Federal Candidate	Support Office Sough	ht: House District:
STRICKLAND THEODORE	Oppose Presid	dent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 66999	Disbursemer 2016	nt For:
Full Name of Payee STRATEGIC MEDIA PLACEMENT		of Public Distribution/Dissemination
STRATEGIC WILDIA FLAGLIVILIVI		08 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7669 STAGERS LOOP	Amou	unt
City State Zip Co	ode	501337.42
DELAWARE OH 43018		action ID: WFT2016710919-1 of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Cate	gory/ Type	08 / 04 / 2016
Name of Federal Candidate	Support Office Sough	ht: House District:
STRICKLAND THEODORE	Oppose Presid	dent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 6699	51.69 Disbursement 2016	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		509337.42
(b) SUBTOTAL of Unitemized Independent Expenditures	······	7 7 7
(c) TOTAL Independent Expenditures	·	7 7 7
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized common party committee) any political party committee or its agent.		•
Banning Jay [Electronically Formula [Electronically Formula Electronically Electronically	iled] Date 08	10 2016
Signature		

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	
	C C00027466
Check if 24-hour report	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
ACQUIRE DIGITAL	08
Mailing Address 512A EAST IRIS DR	Amount
City State Zip Code	83883.87
NASHVILLE TN 37204	Transaction ID : WFT2016710920-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
STRICKLAND THEODORE Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	rrsement For: Primary X General Other (specify) ▶
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
Mailing Address 5124 FAST IRIS DR	08 09 2016
Mailing Address 512A EAST IRIS DR	Amount
City State Zip Code	41391.60
NASHVILLE TN 37204	Transaction ID: WFT2016710922-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	08
Name of Federal Candidate Support Office	e Sought: House District:
STRICKLAND THEODORE Oppose	President State: OH State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	125275.47
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Banning Jay [Electronically Filed] Date 0	8 10 2016
Signature	

Schedule E)		FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼			
NRSC		C C00027466	
Check if 24-hour report X 48-hour report New report	Amends report filed	on M = M / D = D / Y = Y = Y = Y	
Full Name of Payee STRATEGIC MEDIA PLACEMENT		Date of Public Distribution/Dissemination	
		08 09 2016	
Mailing Address 7669 STAGERS LOOP		Amount	
City State Zip	p Code	9500.00	
DELAWARE OH 43	3015	Transaction ID: WFT2016710923-1 Date of Disbursement or Obligation	
Purpose of Expenditure DIGITAL MEDIA PRODUCTION	Category/ Type	08 05 7 2016	
Name of Federal Candidate	Support Office	Sought: House District:	
STRICKLAND THEODORE	∑ Oppose □	President State: OH	
Calendar Year-To-Date Per Election for Office Sought	Disbut 2016	rsement For: Primary	
Full Name of Payee	,	Date of Public Distribution/Dissemination	
STRATEGIC MEDIA PLACEMENT		08 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 7669 STAGERS LOOP		Amount	
City State Zip	p Code	4600.80	
DELAWARE OH 43	3015	Transaction ID: WFT2016710925-1 Date of Disbursement or Obligation	
Purpose of Expenditure DIGITAL MEDIA PRODUCTION	Category/ Type	08 / 05 / 2016	
Name of Federal Candidate	Support Office	Sought: House District:	
STRICKLAND THEODORE	Oppose	President State: OH	
Calendar Year-To-Date Per Election for Office Sought 6	Disbu 2016	rsement For: Primary	
(a) SUBTOTAL of Itemized Independent Expenditures		14100.80	
(b) SUBTOTAL of Unitemized Independent Expenditures	·····		
(c) TOTAL Independent Expenditures	·····	7 7 7	
Under penalty of perjury I certify that the independent expenditures repwith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		• • • • • • • • • • • • • • • • • • • •	
Banning Jay [Electronical	Ily Filed] Date 08	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature			

Schedule E)	PAGE 9 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	C C00027466
Check if 24-hour report X 48-hour report New report Amends rep	port filed on /
Full Name of Payee STRATEGIC MEDIA PLACEMENT	Date of Public Distribution/Dissemination
Mailing Address 7669 STAGERS LOOP	08 09 2016 Amount
City State Zip Code DELAWARE OH 43015	190859.07 Transaction ID: WFT2016710926-1 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
MCGINTY ALANA KATHLEEN Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 317597.03	Disbursement For: Primary
Full Name of Payee ACQUIRE DIGITAL	Date of Public Distribution/Dissemination
Mailing Address 512A EAST IRIS DR	08 09 2016 Amount
City State Zip Code	60570.15
NASHVILLE TN 37204	Transaction ID: WFT2016710927-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
MCGINTY ALANA KATHLEEN Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 317597.03	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	> 251429.22
(b) SUBTOTAL of Unitemized Independent Expenditures	>
	7 7 7
(c) TOTAL Independent Expenditures	···· >
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Banning Jay [Electronically Filed] Da	te 08 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

Schedule E)	-11011 01120	PAGE 10 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
NRSC		C C00027466
		<u> </u>
Check if 24-hour report X 48-hour report New	w report Amends report fil	ed on M M / D D / Y Y Y Y Y
Full Name of Payee ACQUIRE DIGITAL		Date of Public Distribution/Dissemination
		08 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 512A EAST IRIS DR		Amount
City State	Zip Code	8000.00
NASHVILLE TN	37204	Transaction ID : WFT2016710929-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION	Category/ Type	Date of Disbursement of Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	fice Sought: House District:
MCGINTY ALANA KATHLEEN	X Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	317597.03 Dis	sbursement For: Primary X General 16 Other (specify) ▶
Full Name of Payee	,	Date of Public Distribution/Dissemination
ACQUIRE ĎIGITAL		M = M / D = D / Y = Y = Y
Mailing Address 512A EAST IRIS DR		
		Amount
City State	Zip Code	23167.81
NASHVILLE TN	37204	Transaction ID : WFT2016710930-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT	Category/ Type	08
Name of Federal Candidate	Support Of	fice Sought: House District:
MCGINTY ALANA KATHLEEN	∑ Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary
-		
(a) SUBTOTAL of Itemized Independent Expenditures	····	31167.81
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or authoratty committee) any political party committee or its agent.		
	ectronically Filed] Date	08 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	PAGE 11 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRSC	C C00027466
Check if 24-hour report X 48-hour report New report	Amends report filed on
Full Name of Payee STRATEGIC MEDIA PLACEMENT	Date of Public Distribution/Dissemination
Mailing Address 7669 STAGERS LOOP	08 09 2016 Amount
City State Zip Code	2000.00
City State Zip Code DELAWARE OH 43015	Transaction ID : WFT2016710939-1 Date of Disbursement or Obliqation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION Categor Typ	ory/ ype 08 / 08 / 2016
Name of Federal Candidate	Support Office Sought: House District:
MCGINTY ALANA KATHLEEN	Oppose President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 317597.	Disbursement For: Primary ☐ General 2016 Other (specify) ►
Full Name of Payee STRATEGIC MEDIA PLACEMENT	Date of Public Distribution/Dissemination
Mailing Address 7669 STAGERS LOOP	08 09 2016 Amount
City State Zip Code	de 7200.00
City State Zip Code DELAWARE OH 43015	Transaction ID : WFT2016710940-1 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION Categor Typ	
Name of Federal Candidate	Support Office Sought: House District:
MCGINTY ALANA KATHLEEN	Oppose President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 317597.	Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	
Banning Jay [Electronically Filed	ed] Date 08 10 2016
Signature	

Schedule E)	NDENI EXPEND	ITORES		PAGE 12 OF 14 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEG	C IDENTIFICATION NUMBER ▼
NRSC			C	C00027466
Check if 24-hour report X 48-hour rep	port New rep	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee STRATEGIC MEDIA PLACEI	MENT		Date of Pr	ublic Distribution/Dissemination
Mailing Address 7669 STAGERS LOOP			08 Amount	09 2016
City	State	Zip Code		24800.00
DELAWARE	ОН	43015		on ID: WFT20167101010-1 isbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION		Category/ Type	M M M	08 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
MCGINTY ALANA KATHLEEN		Oppose	President	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		317597.03	Disbursement Fo	r: Primary X General (specify) ▶
Full Name of Payee	-		Date of P	ublic Distribution/Dissemination
ACQUIRE DIGITAL			M = N 08	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 512A EAST IRIS DR			Amount	
City	State	Zip Code		6068.11
NASHVILLE	TN	37204		on ID : WFT20167101013-1 visbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT		Category/ Type	M 08	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
BAYH EVANS BIRCH III		Oppose	President	Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		230762.94	Disbursement Fo	or: Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Independent Ex	penditures		•	30868.11
(b) SUBTOTAL of Unitemized Independent	Expenditures		•	7
(c) TOTAL Independent Expenditures			·	77. 1 77. 1 77. 1
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Banning Jay	[Electron	ically Filed] Date	M M / D	0 / 2016
Signature				

Schedule E)	PAGE 13 OF 14 FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
NRSC	C C00027466					
	<u> </u>					
Check if 24-hour report X 48-hour report New report Amends report	ort filed on Man / Dab / Yayayay					
Full Name of Payee DEL RAY MEDIA	Date of Public Distribution/Dissemination					
	08 08 2016					
Mailing Address 1427 LESLIE AVE.	Amount					
City State Zip Code	171692.50					
ALEXANDRIA VA 22301	Transaction ID : WFT201671091-1					
Purpose of Expenditure ALEDIA DI ACEMENT Category/	Date of Disbursement or Obligation					
MEDIA PLACEMENT Type	08 04 2016					
Name of Federal Candidate Support	Office Sought: House District:					
BAYH EVANS BIRCH III Oppose	President Senate State: IN					
Calendar Year-To-Date Per Election for Office Sought 230762.94	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶					
Full Name of Payee	Date of Public Distribution/Dissemination					
DEL RAY MEDIA	M = M / D = D / Y = Y = Y					
Mailing Address 1427 LESLIE AVE.	08 08 2016					
	Amount					
City State Zip Code	25000.00					
ALEXANDRIA VA 22301	Transaction ID: WFT201671094-1 Date of Disbursement or Obligation					
Purpose of Expenditure MEDIA PRODUCTION Category/ Type	08 / 05 / Y Y Y Y Y Y Y					
Name of Federal Candidate Support	Office Sought: House District:					
BAYH EVANS BIRCH III	President X Senate State: IN					
Calendar Year-To-Date	Disbursement For: Primary General 2016					
Per Election for Office Sought 230762.94	Other (specify) -					
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 196692.50					
(b) SUBTOTAL of Unitemized Independent Expenditures						
	7 7					
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.						
Banning Jay [Electronically Filed] Date	e 08 10 2016					
Signature						

Schedu	ile E)	HOENT EXPENDI	TOTILS		PAGE 14 OF 14 FOR SE OF FORM 24/48	
	F COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
NRSC)				C C00027466	
Check if	24-hour report X 48-hour re	port New repo	ort Amends repo		M / D = D / Y = Y = Y = Y	
Full N	Name of Payee RATEGIC MEDIA PLACE	MENT			of Public Distribution/Dissemination	
Mailin	ng Address 7669 STAGERS LOOP			Amou	08 09 2016 nt	
City	AWARE	State OH	Zip Code 43015		21238.00 action ID : WFT2016710924-1	
	ose of Expenditure DIA PRODUCTION		Category/ Type		of Disbursement or Obligation OB 05 2016	
Name	e of Federal Candidate		Cupport	Office Sough	t. House District:	
STRI	ICKLAND THEODORE		Support Oppose	Office Sough Preside		
	Calendar Year-To-Date Per Election for Office Sought	,	669951.69	Disbursemen 2016 O	t For: Primary X General	
Full N	Name of Payee			Date o	of Public Distribution/Dissemination	
Mailir	ng Address			Amou	nt	
City		State	Zip Code			
Purpo	ose of Expenditure		Category/ Type	Date of	of Disbursement or Obligation	
Name	e of Federal Candidate		Support Oppose	Office Sough		
	Calendar Year-To-Date Per Election for Office Sought		1 1 1	Disbursemen	t For: Primary General ther (specify) ▶	
(a) SU	JBTOTAL of Itemized Independent Ex	xpenditures		· [21238.00	
(b) SU	JBTOTAL of Unitemized Independent	Expenditures			4	
(c) TO	OTAL Independent Expenditures			•	2232966.17	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Sia	Banning Jay	[Electron	ically Filed] Date	9 08	10 / 2016	
- 3						